- PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

7590

03/22/2005

Harry F. Smith, Esq.
Ohlandt, Greeley, Ruggiero & Perle, L.L.P.
10th Floor
One Landmark Square

One Landmark Square Stamford, CT 06901-2682



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name) (Signature)

 APPLICATION NO.
 FILING DATE
 FIRST NAMED INVENTOR
 ATTORNEY DOCKET NO.
 CONFIRMATION NO.

 09/893,158
 06/27/2001
 Anni Rosa Coden
 YOR 920010096US1
 3829

TITLE OF INVENTION: METHOD AND APPARATUS PROVIDING CAPITALIZATION RECOVERY FOR TEXT

APPLN, TYPE	SMALL ENTITY	ISSUE FI	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700 6/2005 HALI3	2 0000	0143 500510 098931	
EXAM	MINER	ART UN	IT	CLASS-SUBCLASS			. na	
ĽUDWIG, I	MATTHEW J	2178			℃:1501 ℃:1504	1400.00 300.00		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the na or agents (2) the na registered 2 registered	nting on the patent front page, I unes of up to 3 registered pate OR, alternatively, me of a single firm (having as attomey or agent) and the nan ed patent attorneys or agents. If name will be printed.	a member a	Ruggi L.L.P Sathe	dt, Greeley, ero & Perle, eesh K. Karra	
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON T	HE PATEN	T (print or type)				
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified ben 37 CFR 3.11. Completion	elow, no assignee of this form is NO	iata will app Ta substitute	pear on the patent. If an assignment.	nce is identified t	clow, the	document has been filed for	
(A) NAME OF ASSIGN	IEE	(B) RESIDEN	CE: (CITY and STATE OR CO	UNTRY)			
	nal Business e assignee category or catego		_	oration patent): Dindividual 20	Armonk,			
4a. The following fee(s) are			. Payment of		•	·		
Issue Fee			A check	in the amount of the fee(s) is ea	nclosed.			
Publication Fee (No:	small entity discount permitte	ed)	D Payment	by credit card. Form PTO-203	8 is attached.			
Advance Order - # o	f Copies1		The Dir Deposit Acc	ector is hereby authorized by sount Number50 - 0.5	harge the require O (enclos	d fee(s), or se an extra o	credit any overpayment, to copy of this form).	
	(from status indicated above							
	MALL ENTITY status. See			cant is no longer claiming SMA				
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ont and Trademark	ion Fee (if a from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	ly paid issue fee to istered attorney o	the applic agent; or t	ation identified above. the assignee or other party in	
Authorized Signature	PAOIM			Date	June 8,	2005		
Typed or printed name _	Paul D. Gre	eley		Registration	No. 31,0	19		
an application. Confidential submitting the completed a this form and/or suggestion	pplication form to the USPT of for reducing this burden, strain 22313-1450. DO NOT	. 122 and 37 CFR O. Time will vary	l.14. This co depending u Chief Infor	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any c mation Officer, U.S. Patent and D FORMS TO THIS ADDRES	minutes to comple omments on the a	ete, includi mount of t	ng gathering, preparing, and ime you require to complete	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

14 2005 世 HE UNITED STATES PATENT AND TRADEMARK OFFICE PATENT TRANSMITTAL FORM

Applicant(s):

Coden et al.

Serial No.:

09/893,158

Filed:

June 27, 2001

For:

METHOD AND APPARATUS PROVIDING CAPITALIZATION

RECOVERY FOR TEXT

Art Unit:

2178

Examiner:

Matthew J. Ludwig

Confirmation No.:

3829

Customer No.:

27623

Attorney Docket No.: YOR920010096US1

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

We are enclosing:

- 1. PTOL-85 (in duplicate);
- 2. Transmittal letter in duplicate; and
- 3. Postcard.

Please charge the fee of \$1703 (\$1,400 issue fee, \$300 publication fee and \$3 extra copy fee), and any additional fees or credit any such fees, if necessary to Deposit Account No. 50-0510 in the name of International Business Machines Corporation (IBM). A duplicate copy of this sheet is attached.

Respectfully submitted,

Date: June 8, 2005

Paul D. Greeley, Esq.

Reg. No. 31,019

Ohlandt, Greeley, Ruggiero & Perle, L.L.P. One Landmark Square, 10th Floor

One Landmark Square, 10" Floor Stamford, Connecticut 06901-2682

(203) 327-4500

CERTIFICATE OF HANDLING

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING HAND-DELIVERED BY

ADDRESSED TO: MAIL STOP ISSUE FEE, COMMISSIONER FOR PATENTS,
P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON June , 2005.

		June	, 2005
NAME	SIGNATURE		DATE